



# MILPITAS TEEN CENTER REGISTRATION FORM

Please Print



Today's Date: \_\_\_/\_\_\_/\_\_\_ Parent/Legal Guardian Name: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Emergency Contact/Relationship: \_\_\_\_\_ / \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Medical Information and Liability Release

This information is confidential and will be kept on file. Please check the condition(s) that apply to your participant.

\_\_\_ Asthma \_\_\_ Diabetes \_\_\_ Allergies \_\_\_ Other \_\_\_\_\_

Please list any allergies your participant may have: \_\_\_\_\_

Please list any medications your participant is prescribed: \_\_\_\_\_

**DO NOT SIGN THIS DOCUMENT BEFORE YOU READ IT AS IT CONTAINS A WAIVER AND RELEASE OF LIABILITY TO WHICH YOU WILL BE BOUND**

## Release of Liability

I, \_\_\_\_\_ declare that I am the parent/legal guardian of \_\_\_\_\_ .  
I, the undersigned, do hereby agree to allow the individual(s) named herein to participate in the aforementioned activity(ies) and I further agree to indemnify and hold the City of Milpitas harmless from and against any and all liability for any injury which may be suffered by the aforementioned individual arising out of or in any way connected with his/her participation in this activity. The undersigned further authorizes the administration of any first aid steps that may be deemed necessary by qualified personnel. I also grant full permission to the City of Milpitas to use the name and any photographs, videographs, motion pictures or recordings of the individuals named herein for any publicity and promotion purposes without obligation or liability to me. I verify that all the above information is true and accurate. I have read, understand and agree to all of the policies of Milpitas Parks and Recreation Services' in regards to Refund/Cancellations, Transfers, Late Pick-Ups, Camp and Workshop Refunds/Transfers, Code of Conduct and Discipline Plan, and Class Cancellations and Wait Lists listed in the current Activity Guide, on the website and/or on the back of this form. **I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND I FULLY UNDERSTAND THAT, BY SIGNING BELOW, I AM WAIVING ANY RIGHT THAT I MAY HAVE TO BRING A LEGAL ACTION OR TO ASSERT A CLAIM AGAINST THE CITY OF MILPITAS FOR NEGLIGENCE ON BEHALF OF MYSELF AND THE INDIVIDUALS NAMED HEREIN.**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent \_\_\_\_\_

Guardian \_\_\_\_\_

Date Received \_\_\_\_\_  
Group Home Contacted \_\_\_\_\_

Staff Only  
Membership Card Printed \_\_\_\_\_  
Staff Initials \_\_\_\_\_